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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. ASKANS FOR DAN SULLIVAN 3705 ARCTIC BLVD #447 ADDRESS (number and street) (Check if address is changed) **ANCHORAGE** 99503 ΑK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tim@kochandhoos.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.dansullivanforalaska.com (Check if address is changed) DATE 08 2020 C00570994 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. KOCH, TIMOTHY, A.,, Type or Print Name of Treasurer KOCH, TIMOTHY, A.,, [Electronically Filed] 10 08 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

ı	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Name		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)    SULLIVAN, DAN, , ,	plete the candidate
Cano	lidate		
	lidate ⁄ Affiliati	on REP Office Sought: House X Senate President	State AK District 00
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Parl	ty Con	nmittee:	(Domoovatio
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	1		

		_
FEC Form 1 (Revised		Page 3
Write or Type Committee Name		
ALASKANS FC	OR DAN SULLIVAN	
6. Name of Any Connected (	Organization, Affiliated Committee, Joint Fundraising	ng Representative, or Leadership PAC Sponsor
SULLIVAN VICTORY	2020	
	OLAN MARCHINATON OT CHUTE 700	
Mailing Address	901 N WASHINGTON ST, SUITE 700	
	ALEXANDRIA	VA 22314 STATE ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee X Joint Fund	draising Representative Leadership PAC Spons
Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and	nd position of the person in possession of committee
	MOTHY, A., ,	
Full Name	,901 N WASHINGTON ST, SUITE 700	
Mailing Address		
	ALEXANDRIA	VA 22314
Title or Position	CITY	STATE ZIP CODE
TREASURER	Telephor	one number 703 - 299 - 8571
3. <b>Treasurer:</b> List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer assistant treasurer).	er of the committee; and the name and address of
Full Name KOCH, TII of Treasurer	MOTHY, A., ,	
Mailing Address	901 N WASHINGTON ST, SUITE 700	
	ALEXANDRIA	VA    22314
	CITY	STATE ZIP CODE
Title or Position TREASURER		one number 703 - 299 - 8571

	m 1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent	THAYER, CURTIS, W., ,	
Mailing Address	4938 MARION AVE	
	ANCHORAGE AK 9950	08 
Title or Position ASSISTANT TR		223 - 8270
safety deposit bo	<b>r Depositories:</b> List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.  Depository, etc.	
	NORTHRIM BANK	
Mailing Addross	NORTHRIM BANK PO BOX 241489	
Mailing Address	PO BOX 241489	
Mailing Address	PO BOX 241489	24
Mailing Address	PO BOX 241489	24 ZIP CODE
Mailing Address  Name of Bank, I	PO BOX 241489  ANCHORAGE  AK 9952  CITY STATE	
	PO BOX 241489  ANCHORAGE  AK 9952  CITY STATE	
	ANCHORAGE  CITY  STATE  Depository, etc.  TRUIST (FORMERLY BB&T)  1909 K ST NW	
Name of Bank, I	ANCHORAGE  CITY  STATE  Depository, etc.  TRUIST (FORMERLY BB&T)  1909 K ST NW	ZIP CODE

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected DEFEND THE SE	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
Mailing Address	228 S WASHINGTON STREET SUITE 115		
ag / .aa.eee			
	ALEXANDRIA	, VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE A
riolationip.	0111 2		
	d Organization Affiliated Committee Join  y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC S
esignated Agent: Identify		nt Fundraising Representa	Leadership PAC S
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esignated Agent: Identify	by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identify  Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Full Name	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.	g Participant:		
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spor
CORNYN SULLIV	AN 2020		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joi	nt Fundraising Representa	ative Leadership PAC S
Full Name			
Mailing Address			
TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	▼ CITY ▲		
anks or Other Depositori	CITY A  ies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
anks or Other Depositori fety deposit boxes or main	CITY A  ies: List all banks or other depositories in whice intains funds.	STATE ▲ Telephone Number	ZIP CODE A
anks or Other Depositoring the deposit boxes or main the many of Bank, CHAIN	CITY A  ies: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
anks or Other Depositoring the deposit boxes or main the many of Bank, CHAIN	CITY A  ies: List all banks or other depositories in whice intains funds.	STATE ▲ Telephone Number	ZIP CODE A
anks or Other Depositoring fety deposit boxes or main arme of Bank, CHAIN expository, etc.	CITY  ies: List all banks or other depositories in whice intains funds.  BRIDGE BANK	STATE ▲ Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
SULLIVAN FOR	THE MAJORITY		
Mailing Address	228 S WASHINGTON STREET SUITE 115		
ag / taaeee			
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	fy by name, address (phone number – optional)	: Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identi		: Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identi		Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) o	r(h). <b>Joint Fundraisin</b> g	y Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundrai	ising Representativ	e, or Leadership PAC Sponsor
	SENATE VICTOR	Y 2020		
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
		ALEXANDRIA	, , , VA ,	22314
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	- - - - - - - - - - - - - - - - - - -	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name Mailing Address	CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
<b>-</b> 9.	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositorisafety deposit boxes or mai	CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
<b>-</b> 9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositorisafety deposit boxes or mai  Name of Bank, Depository, etc.	CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A
<b>-</b> 9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositorisafety deposit boxes or mai  Name of Bank, Depository, etc.	CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
SULLIVAN TILLI	S MAJORITY COMMITTEE		
Mailing Address	PO BOX 97275		
	RALEIGH	NC	27624
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
Pesignated Agent: Identi  Full Name L  Mailing Address	fy by name, address (phone number – optional)  CITY		
Pesignated Agent: Identi  Full Name L  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

h). <b>Joint Fundraisi</b>	ig i ai iioipaitii		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	I Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 60148		
	WASHINGTON	DC	20039
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
Connecte		t Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee  Affiliated Committee  Figure 1. Joint 1. Joint 2. Joi	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee  Affiliated Committee  Figure 1. Joint 1. Joint 2. Joi		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee  Affiliated Committee  Ty Joint  To CITY  To Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Ty Joint  To CITY  To Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Ty Joint  To CITY  To Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected NORTH TO THE	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
NOKIII IO IIIL			
Mailing Address	PO BOX 2814		
Mailing Address			
	SEWARD	, AK	99664
Deletienskin			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Representa	Zauto Zautololiip into G
esignated Agent: Identi			
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or market	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:	550 ID	C
	1		FEC ID number	
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrai		e, or Leadership PAC Sponsor
	Mailing Address	C/O RED CURVE SOLUTIONS		
		138 CONANT STREET, SECOND FLOOR		
		BEVERLY		01915
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	phone Number	
).	safety deposit boxes or ma	ies: List all banks or other depositories in which thintains funds.	e committee deposits	s funds, holds accounts, rents
	Depository, etc.			<u> </u>
	Mailing Address			
		CITY A	STATE A	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:			
	1	<u> </u>	FEC II	D number	C
	2.	<u> </u>	FEC II	D number	C
	3.		FEC II	D number	C
	4.		FEC II	D number	C
6.	Name of Any Connected THE FOUNDERS	Organization, Affiliated Committee, Joint F	Fundraising Re	presentativ	e, or Leadership PAC Sponsor
	Mailing Address	1305 W 11TH ST			
		SUITE 213			
		HOUSTON	I	TX	77008
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	I Organization Affiliated Committee	Joint Fundraisin	g Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – options	al)	1 1 1	
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
			Telephone N	lumber	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in wintains funds.	hich the comm	ittee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.				
	Mailing Address				
		CITY ▲		STATE A	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.	Name of Any Connected SENATE FIREWA	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	1305 W 11TH ST		
		#213		
		HOUSTON	TX	77008
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
		0.77		
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	•	STATE ▲ ephone Number	ZIP CODE ▲
	Banks or Other Depositor safety deposit boxes or ma	Tele	ephone Number	
	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	Tele	ephone Number	
	Banks or Other Depositor safety deposit boxes or ma	Tele	ephone Number	
	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	Tele	ephone Number	
	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	Tele	ephone Number	

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>		FEC ID number	С
		FEC ID number	C
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3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
CRUZ SENATE			
<u> </u>			
	20 20 44027		
Mailing Address	PO BOX 341027		
	AUSTIN	TX	78734
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identing Full Name     Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	sing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
=	ed Organization, Affiliated Committee, Joint Fun	= :	e, or Leadership PAC Spon
ALASKA SENA	TE REPUBLICAN NOMINEE FUND	- DAN SULLIVAN	
Mailing Address	1305 W 11TH ST		
Ü	#213		
	HOUSTON	TX	77008
Relationship:	CITY A	STATE ▲	ZIP CODE A
		int Fundraising Representa	
esignated Agent: Ider	ntify by name, address (phone number - optional)		
esignated Agent: Ider	ntify by name, address (phone number – optional)		
	ntify by name, address (phone number – optional)		
Full Name	ntify by name, address (phone number – optional)		
Full Name	ntify by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name L L L	DN ▼		
Full Name Mailing Address  TITLE OR POSITIO	CITY ▲  citories: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITIO	CITY ▲  citories: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depose aftery deposit boxes or ame of Bank,	CITY ▲  citories: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depose aftery deposit boxes or ame of Bank,	CITY ▲  citories: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depose afety deposit boxes or ame of Bank, epository, etc.	CITY ▲  citories: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depose afety deposit boxes or ame of Bank, epository, etc.	CITY ▲  citories: List all banks or other depositories in which	STATE ▲ Telephone Number	ZIP CODE A